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ABSTRACT

This publication provides guidelines for the development of appropriate services, meaningful orientation, and follow up for young children with disabilities and their families in Kansas. An introduction explains the Bridging Early Services Transition program and lists goals of transition planning. Following this, a section addresses interagency planning and development of the interagency agreement. The guide also considers transition from hospital to community (including a seven-step transition process); a timeline for child eligibility and placement; issues to address in the transition to kindergarten; issues in the development of local transition policies; resources for families; and the Community Transition Planning Guide checklist. (Contains 10 references.) (DB)

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Bridging Early Services

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PURPOSE

This publication, one of three to be issued on transition, is intended to provide guidance as Kansans work together to develop appropriate services and meaningful orientation and follow-up for each child and family in transition.

Prepared by the Bridging Early Services Transition Taskforce, 1995.

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Step On Up

Focus on Transition

Going home from the hospital, greeting a new home visitor, moving on to center-based services, stepping ahead with Head Start, finding appropriate child care, starting kindergarten—in short, transition. It's a process of anticipation, an occasion for new opportunities and challenges and often a time of stress for the child and family as they encounter unfamiliar people and new practices.

Each person brings different emotions and issues to transition. Families of young children with special needs may not be attuned to the legal and practical differences between service systems. At the outset of transition, families seldom know the procedures to be followed. Yet they know their child very well, and they are impelled to find the "right" combination of services for him or her. Significantly, the ways that families develop to navigate an early transition are likely to be used again and again as their child grows older.

In contrast to each family's focus on one child in transition, service providers help to coordinate transitions for many children every year. They must know the transition procedures well and then work with families and other providers to apply these procedures in individually appropriate ways. Service providers must find ways to support many children and families moving between programs, often on different timelines. And they must do transition planning in addition to numerous other activities that demand time and attention. Just like families, service providers want the transition to be "right" for each child and family.

Goals of Transition Planning

1. Make certain that families have the information they need to participate effectively in transition decisionmaking.

2. Consider a range of options for services in order to meet the child's and family's needs and values.

3. Ensure that appropriate services, necessary equipment and trained staff are available in the new setting.

4. Assure that needed services (health, developmental, social, family support) continue without interruption.

5. Prepare the receiving staff with information necessary to support the child and family, and acquaint them with former staff for ongoing consultation regarding programming decisions.

6. Orient the child in order to promote a joyful move to the new setting and to encourage success once enrolled there.

7. Assure that family members are welcomed into the new program and encouraged to share information with its personnel.

8. Meet legal requirements, and make decisions in a timely manner.

9. Increase positive feelings about the new services, and minimize stress for all involved.

Position Statement, 1995, Coordinating Council on Early Childhood Developmental Services

The Bridging Early Services Transition Taskforce has studied early childhood transitions for 14 months at the request of the Interagency Coordinating Council on Early Childhood Developmental Services in Kansas. While there are many transitions for young children with special needs and their families, and while even the same transition (transition to kindergarten) is undoubtedly different across families, application of a few simple guidelines improves every transition. In a Position Statement passed in February 1995, the Coordinating Council on Early Childhood Developmental Services recommended these strategies to make all transitions positive experiences for the children and families involved:

- Develop a shared responsibility for transition planning, with participation by families and representatives of all the agencies involved. Define that joint responsibility in a community plan for transition. Write the plan in an Interagency Transition Agreement. Document, analyze and evaluate each transition, and use this information to improve the community's transition process in the future.
- Involve each family in developing their child's transition plan and making decisions about new services. Honor each family's values, and respect the fact that families may choose to participate in transition planning in various ways, depending upon other issues in their lives.
- Share information, both before and after transition, among family and responsible agencies (with family permission).
- Support the child and family before and after transition to build confidence and competence.

Interagency Planning

A Shared Responsibility for Transition

The clear intent of federal legislation is to bring responsible agencies and families together to plan a transition process that maximizes continuity and minimizes disruptions in the services that promote each child's development. Interagency coordination and parent involvement in transition planning are essential to ensure continuity in services. No one agency can "do" transition independently and be effective.

"There was no shortcut. The Head Start and kindergarten teachers had to get together and begin to talk before we could trust each other."
Wellington transition coordinator

It is important for community agencies and families to plan a process for all local transitions and then for individual IFSP/IEP teams to apply and adapt that process as appropriate with individual families. It is recommended that representatives of local Infant-Toddler Services, the Local Education Agency (LEA), families, Head Start, health agencies, social service agencies, preschools, child care centers and other organizations that serve young children meet to develop local transition procedures. For moves from a medical center to the community, the hospital must play an important role.

The Community Transition Planning Guide on page 15 can be used to structure local transition planning.

Procedures should be included in a written interagency agreement that is negotiated among and agreed to by all relevant parties. Questions to be answered in the agreement include:

- **Who is responsible for each element of the transition plan?**
- **What is the timeline for transition activities?**
- **Which meetings will occur, and who will convene them with how much advance notice to participants?**
- **What information will be shared between programs, by whom, and on what schedule?**
- **How will family members be given the information they need to participate actively and meaningfully in the transition process?**
- **What procedures will be used to reduce needless repetition in evaluation?**
- **How will financial obligations related to the transition be met?**
- **How will each family's transition, as well as the community's transition plan, be evaluated?**
- **How will the legal requirement of "natural environment" or "least restrictive environment" be satisfied for each child?**
- **How will the local plan ensure "no cost to families" from birth through age 2 and "free and appropriate" services for every child beginning on the third birthday?**
- **What will be done to prevent discontinuity for children who experience their third birthdays in late spring, summer or early fall?**
- **How will needed family services included in the IFSP be continued if they are not within the realm of the educationally-related services that are the responsibility of the school district?**
- **What provision is the community making for children who have been served by Infant-Toddler Services but are not eligible for special education services at age 3?**

Often the answers to these questions come from interagency efforts to resolve dilemmas that arise for a particular family or for a cohort of children with birthdays during a specific calendar period. The process can then be put in written form and used to guide other similar transitions.

Ideally, all agencies with an interest in young children and their families commit to the transition agreement and then apply its framework for their own internal planning. They also agree to review the agreement annually and modify it to accommodate issues that arise.

Going Home

Transition from Hospital to Community

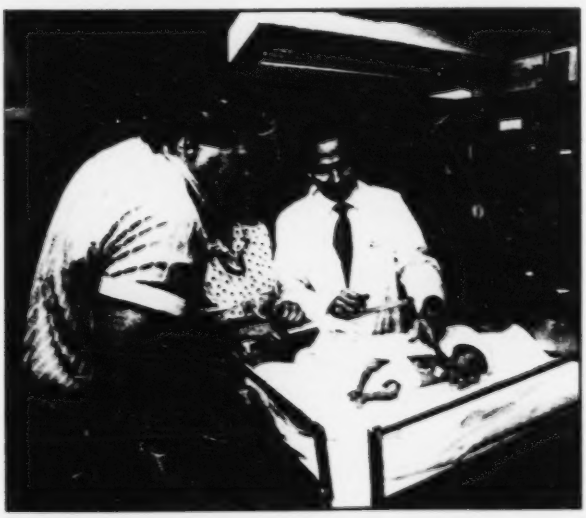
The Bridging Early Services Transition Taskforce has developed guidelines for a uniform hospital-to-home transition process for children receiving Infant-Toddler and "at risk" referrals in the state of Kansas. These guidelines are currently being field-tested and evaluated by families, hospital service providers and community Infant-Toddler Service networks in five regions of the state. Subsequently, they will be implemented statewide. The guidelines provide a process that meets federal regulations, but they also provide for maximum flexibility for adaptations to fit local and individual family resources and needs.

Target Populations

All children meeting eligibility criteria for Infant-Toddler Services, as well as those children identified to be at-risk for developmental delay, are included in the target population.

The transition plans to be developed include all hospital units serving children from birth to three years of age: NICU, well-baby nursery, general pediatric units, pediatric intensive care units, pediatric specialty units and possibly hospital-associated pediatric clinics.

Transition plans to be developed also will affect all Local Interagency Coordinating Councils (LICCs), which will receive referrals and coordinate community services for children from birth through two years of age and their families. Similar transition planning is also advised for older children returning to their communities after hospitalization.



Transition Process

Although transition plans will be developed to fit local personnel, resources and needs, the following seven elements characterize the recommended hospital-to-community transition planning:

1. Identifying and Monitoring Eligible Children. Each hospital that serves children who are potentially eligible for Infant-Toddler Services will be responsible for developing a process to monitor and identify those children. This monitoring may be accomplished by an individual or a team. It is suggested that the individual(s) chosen for this task be comfortable with developmental issues.

A checklist has been developed to determine whether a referral is appropriate. It may be obtained from Bridging Early Services Transition Project, 316-241-7754, or from Infant-Toddler Services, 800-332-6262.

2. When To Refer Eligible Children to the Community. Once it has been determined during the child's hospitalization that a referral to early intervention services is appropriate, the referral needs to be made within two working days, according to federal and state regulations. Parental permission is not required for either two-day referral to Infant-Toddler Services or discharge notice (referral for screening and monitoring).

After receiving the referral, the LICC representative will then contact the family to determine their interest in participating in services and to identify any needs the family may have for community support prior to the child's discharge from the hospital.

3. Facilitating the Transition from Hospital to Home. Each LICC, in collaboration with local and regional hospitals, will develop a systematic plan to support children's transition from hospital to home.

LICCs and hospitals, in partnership with local families, will identify individuals to support families during this transition. Each LICC will designate a local contact person for referrals. A list of contact persons from across the state will be made available to hospitals.

4. Family Role in Transition. It is expected that family members or designated caregivers, such as foster parents, will participate in a meeting to plan a child's transition to the home. Families or caregivers will be able to negotiate their chosen level of involvement in the transition during this planning meeting.

5. Formulating a Family Transition Plan. Each hospital will establish a process for developing a transition plan with the family. Forms available from the offices listed in step 1 define the content for the transition planning document that provides necessary information yet maintains confidentiality. These forms are recommended, but each community may adapt them to fit local needs.

6. Initiating the Referral to Community Services. Referral forms such as those available from sources listed in step 1, will be completed and sent to the county health department, the LICC contact person and the primary care physician. The LICC contact person has primary responsibility for coordination with the health department and the primary care physician. This individual, as a representative of Infant-Toddler Services, also is responsible for providing families with information about community options for services.

7. Community Feedback to the Referral Source (Hospital). The recommended referral document has a feedback report, which is intended to provide the referral source with information from the receiving agency. The latter will be expected to complete this page and return it with parental consent to the hospital's contact person and the child's physician. This feedback page should be completed and returned after the family has been contacted, their needs have been assessed, and either a plan for services has been established or the family has declined services.

For further information about any element of this process, please contact Bridging Early Services at 316-241-7754.

"Our family's transition from home-based to center-based was a success story. It was a comfort to me that our home-based teacher obviously had good communication with the center-based teacher and could readily identify how things would change — and also what services would not.... It was nice to have people contact me during our transition—the bus driver, the school nurse, the teacher and all the therapists did not wait for me to come to them. It helped me realize that they took transition very seriously. An organized transition team can really lend support to a family as they adapt to a new environment.... The attention to detail of the center-based team and their willingness to ask my opinions or preferences helped all of us through our anxiety. It's unfortunate that for some parents of children with special needs, transition has become something to fear. It can be a time to enjoy new opportunities for our children—and ourselves."

Ann Davidson, Newton parent

For Toddlers ...

Teachers in MCKIDS, McPherson County's home-based early intervention program, collaborate with staff from preschool services to help young children feel comfortable in their new setting. After the IEP has been written and the placement location in Head Start/ECSE, community preschool or child care has been determined, the infant-toddler home visitor accompanies the child for several weeks in visiting the new classroom. These visits occur one day per week in lieu of a home visit. Parents may also attend if they choose to do so. This practice encourages the child to explore a new environment and meet new people in the presence of a familiar adult. It also allows the two teachers to share observations and develop a consultative relationship. Modifications in the environment are planned, and fittings for adaptive equipment occur. Frequently, if parents wish, an accompanied school bus ride is built into the transition plan.

Starting Preschool in Hutchinson

For a number of years the Early Education Center at Hutchinson conducted a Toddler Transition Class for children moving from home-based to center-based services. Accompanied by their parents, the almost-3-year-olds learned songs and finger plays, explored new toys and ate a snack together during the abbreviated sessions. Staff of the Early Education Center were available at the playgroups to meet with parents, answer questions and help the entering preschoolers have a delightful time. Copies of the curriculum for the eight transition sessions are available for $10 from the Early Education Center, 316-663-2671.

Step Ahead

Two Programs — One Intervention at Age 3

On or near the third birthday, a child leaves Infant-Toddler Services (Part H of the Individuals with Disabilities Education Act [IDEA]), and the child then steps ahead, either to Early Childhood Special Education (ECSE) services under Part B of the law or to some other community program suggested by the transition team. Either course is discussed and prepared by the child's family and the transition planning team. Following is a sample timeline of events that need to occur in each Kansas community to make sure that transition is a joyful one—a normal part of growing up.

Time	Action
Entry into infant-toddler program	Family is introduced to transition
Each IFSP meeting	Family questions about transition, service options and natural environments are answered; planning for any upcoming transitions occurs in IFSP
At least 6 months prior to child's third birthday	Parents sign permission to provide basic demographic information to local education agency (LEA); service coordinator discusses transition process with family; transition outcomes are included in IFSP; and family chooses transition activities they will participate in. Those are indicated on the IFSP
3-6 months prior to third birthday	Assessment updates completed by family and program team
3-5 months prior to third birthday	Family is given materials to help them evaluate potential preschool options
100 days before the third birthday; scheduled before the end of the school year if child's birthday is in summer or early fall	With parents' permission, a "90 day" transition meeting for family, LEA and infant-toddler services staff is scheduled by the infant-toddler service coordinator
At least 90 days before third birthday	Transition meeting occurs with family, LEA and infant-toddler staff to • share progress reports • develop a transition plan • explore placement options • secure permission for comprehensive evaluation • review due process rights • identify a school system contact for the family • answer family questions
Prior to third birthday	Team decides eligibility for special education services. If child is eligible, IFSP/IEP meeting is attended by family, infant-toddler staff, school system staff, staff of potential receiving programs (Head Start, child care) and others, as desired by family. If child is not eligible for special education, team works to develop other options for preschool services, as desired by the family. Section 504 of the Rehabilitation Act may be relevent for some children
Around third birthday	Child's records go from infant-toddler program to new teacher
After child moves	Sending and receiving teachers confer to support a smooth transition
After transition	Family, infant-toddler staff, LEA and others, as appropriate, participate in evaluating the transition

"There were so many issues in my son's transition, and they affected everyone in our family. We made a list of the issues and worked through them one by one. The school team and our family service coordinator patiently worked with me to find a plan that would help our son, without causing difficulties for other family members. And it is working!"

Shawnee County mother

It's a Big Step

Transition to Kindergarten

Young children and their families make many moves among residences, care providers and friendship groups. Even so, the transition into kindergarten from home or prekindergarten program(s) stands as a major milestone for both children and their families. Both families and service providers recognize that good beginnings help young children to enjoy being at school. Good beginnings also help to prevent later problems, such as academic failure, school drop-out and anti-social actions.

"The preschool took a field trip to the kindergarten. Everybody had a good time. It helped the children look forward to going to kindergarten."

El Dorado psychologist

Many of the transition strategies that aid children with special needs help all other children as well. The Taskforce hopes that Kansas communities will choose to embed transition planning for children with special needs within a broader community transition initiative.

Communitywide planning for transition to kindergarten has been encouraged by the federal government under the National Education Goals, as part of site-based planning in Kansas's school restructuring, in Head Start regulations and by position statements from numerous professional organizations. Communitywide planning for transition to kindergarten is consistent with the position of the Kansas State Board of Education that quality services for children are the shared responsibility of families, schools and other agencies in the community.

Here are some of the issues to be considered when families, prekindergarten and kindergarten teachers and agency administrators come together to plan the community's transition to kindergarten policies and activities:

- joint activities to orient families and welcome them into active participation in school life
- activities to orient children (classroom visits, playground visits, books, personal notes, videotapes, return visits by kindergarteners to a prekindergarten class)
- timelines, including when IEPs are to be completed and school placements decided
- visits of prekindergarten and kindergarten teachers to one another's classrooms
- co-training of prekindergarten and kindergarten staff on developmentally appropriate curriculum for young children
- successful ways to include children with special needs in group activities
- ways to share information (with parent permission) about children's special interests and abilities
- ways to provide continuity for children (books, music, routines, objects, topics for study, classroom arrangements, rules)
- prekindergarten learnings that will help children feel more comfortable in kindergarten (asking for help, recognizing printed name, communicating full name, lining up if that will be required in kindergarten)
- discussion of how to continue services to families that have been provided by Head Start or ECSE that are not the school district's responsibility at age 5; other community agencies must be drawn into these discussions in order to use effectively the available resources to meet real family needs

It is important for schools to plan with prekindergarten programs how to teach the diverse children who come to them. New methods of structuring classrooms and teaching key concepts allow teachers to provide success for children functioning at very different developmental levels. Either prekindergarten or kindergarten programs may initiate the discussions, but all need to be involved to create smooth transitions and continuous progress for all children, including those who are gifted and those with disabilities.

"Since teachers have been taking turns visiting each other's programs, we understand better what others are dealing with. We have begun to share ideas about teaching."

Dodge City teacher

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Mud Puddles

Challenging Issues

A number of questions appear again and again as communities seek to define their local transition policies—and here are some possible solutions:

Comprehensive Evaluation/Sharing of Information. Because a child nearing the third birthday is a candidate for special education services for the first time, a comprehensive evaluation is required. This means assessing all domains of concern, using norm-referenced or criterion-referenced measures.

However, current evaluation information available from the infant-toddler program may be used, rather than re-administering the same test or a similar one. Reusing existing test data makes sense for the young child who isn't put through unnecessary assessment; for the parents, who see the transition process expedited in a sensible manner; and for the school district, which saves time and expenses by not retesting. Potentially everyone benefits if tests administered to the child by well-known people in familiar surroundings yield more valid results.

"It makes so much sense to me to continue with an IFSP after age 3. My husband and I really appreciate having it all down on one piece of paper."
Independence parent

Parent permission is required for the sharing of assessment information, even if the personnel who conduct or interpret the test are the same for the infant-toddler program and preschool services.

Eligibility. Eligibility standards are slightly different between Part H and Part B. Eligibility for one does not automatically assure eligibility for the other. It is important that this difference in eligibility standards be explained to parents early in the year prior to transition.

Children from birth through age two are eligible for Infant-Toddler Services if they are identified as having a developmental delay, a known condition leading to a developmental delay or if they have an established risk for developmental delay. For Infant-Toddler Services, developmental delay is defined as any one of the following findings obtained using the appropriate standardized instruments and procedures in one or more areas of development (cognitive, physical, communication, social-emotional or adaptive behavior)

1) there exists a discrepancy of 25 percent or more between chronological age after correction for prematurity and developmental age in any one area;

2) the child is functioning at 1.5 standard deviations below the mean in any one area;

3) there are delays of at least 20 percent, or at least one standard deviation below the mean, in two or more areas; or

4) the clinical judgement of the multidisciplinary team concludes that a developmental delay exists when specific tests are not available or when testing does not reflect the child's actual performance.

Between ages 3 and 6, a child is eligible for Early Childhood Special Education services if a multidisciplinary team has determined that a child performs at least 1.5 standard deviations below the mean on a standardized test in one or more of the following areas: cognitive, adaptive behavior, communication, motor development or social-emotional behavior, or requires special education and related services when test results are unreliable, inconclusive or the child has a diagnosed condition that has a high probability of resulting in the need for special education and related services; in either case, the special needs must not be primarily the result of environment, economic disadvantage or cultural differences.

Continuing Use of the IFSP. Federal law allows and Kansas leaders encourage the use of the Individualized Family Service Plan up to age 5. The IFSP can continue to be used after the third birthday as long as the elements of the IEP are contained within the IFSP. If services discussed in the IFSP are to be provided by an agency other than the school system, the providers must be clearly delineated. The required statements of goals and objectives may continue to be written in the format of outcomes.

Coordination. Often an informal routine for transition exists within a community, but families don't know who to call for information. It is essential that a Transition Coordinator be named by both sending and receiving agencies and that these names and their telephone numbers be shared with families. In most cases the family service coordinator will serve as Transition Coordinator for Infant-Toddler Services, but many different persons could perform this function for ECSE or for the primary school.

Natural Environments/Least Restrictive Environments. Early intervention prior to age 3 must be provided "to the maximum extent possible in natural environments where children without disabilities are served" (IDEA). After age 3, children with special needs are to be

served routinely in their natural environments with individually-appropriate support provided to help them learn there.

Movement to a more restrictive environment is to occur "only when the nature or severity of the disability is such that education in that environment, with the use of supplementary aids and services, cannot be achieved satisfactorily" (KSBE, 1992). Some challenges that commonly appear in the attempt to provide community-based services include finding suitable programs, training staff, paying tuition, arranging transportation and team communication.

Kansans at this time are employing a host of creative solutions to the challenges of serving infants, toddlers and young children within the many types of natural environments available in various rural and urban areas. To meet the requirements of the law, each community's transition planners need to assess their local options, learn from placement plans in other communities and explore new ways that services can be delivered. The Kansas State Board of Education (1992) notes: "The local education agency shall not routinely place all children identified as eligible for Early Childhood Special Education services in the same program, nor shall placement in a restrictive setting be the only educational option considered for all children eligible for ECSE services."

Follow-up. Transition doesn't end on the day the child enters the new program. Collaboration between sending and receiving service providers and the family before, during and after the move helps the child to participate in new experiences with confidence and success. It also aids the new staff in offering developmentally appropriate activities to the child, guiding behavior in effective ways, and supporting the parents as they enter the culture of the new setting.

Crossing the Mud Puddles: One Family's Story

Zeke is a little boy with multiple disabilities. His transition is a good example of one with complex issues to be resolved. It worked well for all because everyone involved considered many options.

Zeke's IFSP included many agencies: He attended full-time child care with the assistance of a Foster Grandparent provided at no cost to the family from the Topeka Foster Grandparent Program. He came to TARC with his foster grandparent two times each week for early intervention services. Zeke's teacher consulted at the child care center every other week and made a home visit in alternate weeks. This individual also served as family service coordinator. Zeke received physical therapy, speech consultation and occupational therapy from the Capper Foundation.

A Transition Meeting was held 90 days before Zeke's third birthday. Personnel from Zeke's school district, which was located outside the city limits of Topeka, had not previously met Zeke or his family. TARC showed a videotape of Zeke in his classroom, making choices by using a big red switch and participating happily in group singing. Information about Zeke and his family was shared by the family and TARC. The team members made plans for Carol, Zeke's mother, to visit preschools within the home school district and also at the Capper Foundation in Topeka. Additional testing was scheduled, and the date was set for the eligibility meeting.

The challenges included: Zeke needed full-time child care. His family wanted him in a center rather than a family day care home. The few centers within Zeke's school district were not appropriate for Zeke's needs. Zeke has a 12-month old sister, who also needed child care—if possible, in the same center as her brother. Many centers suitable for Zeke would not accept an infant. The school district's preschool program convened from 9 to 11:30 A.M. at a location far from the parents' workplaces, making transportation a challenge. Further, the Foster Grandparent, potentially a wonderful support for Zeke and a source of continuity during transition, would need to arrive at his chosen preschool and child care center via public transportation, which was not available in the suburban school district.

The team determined that the Capper Foundation was the best location for both preschool and child care for Zeke.

Transportation presented a problem, as the school district believed that it could pay a mileage reimbursement to the parents but could not transport Zeke to a location outside the district. A call to the Kansas State Board of Education clarified this issue: Transportation could be provided for Zeke outside the school district since the placement was written into his IEP.

After transition, Zeke attends both preschool and child care at the Capper Foundation. The Foster Grandparent is brought to the preschool by Zeke's parents and returns home by public transportation. She is also the back-up babysitter, providing care when Zeke is ill or when the preschool is closed. Zeke's sister attends another child care center. The carefully-crafted plan is working well.

Kathy Johnson, TARC
Topeka

The local transition plan defines the commitment of relevant agencies to assist one another and families in following-up and evaluating transitions. Communication strategies that are helpful with many families can be specified.

Continuation of Services That Aren't the Financial Responsibility of Local Education Agency under Part B. The infant-toddler network is bound by law to consider a wide range of services for children and families. The schools, on the other hand, are obligated to provide education and educationally-related services, as appropriate for individual children. Families and service providers must understand that difference in the programs' definitions is based on federal legislation.

Some services to families may be continued by the schools under the "parent counseling and training" provisions of IDEA. Other services (respite care, nutrition counseling) may need to be provided by other community agencies after the child's third birthday. Strategic planning on this issue should be accomplished by the local interagency council, and a community plan developed. Specific questions raised by individual families will help the council to refine its plan and ensure that services are available for those who need them.

Possible Service Locations for Children, Birth through Age 5

- Home
- Family child care home
- Child care center
- Preschool
- Nursery school
- Before & after school care
- Library children's hour
- Hospital
- Clinic
- Parents as Teachers
- Public school prekindergarten
- Head Start
- Public health home visiting
- Community play group
- Kindergarten
- Resource room
- Non-graded primary program
- Early childhood special education classroom
- Even Start

Payment for Services Around the Third Birthday. Often it is beneficial for a child to start services in the ECSE program a few weeks or months prior to the third birthday or to receive ECSE services in the Part H system for a period after the third birthday.

The Kansas lead agencies for the two programs—Health and Education—both strongly recommend making the transition timeline appropriate to child and family needs and developing financial arrangements locally to accomplish that goal. Flexibility in use of funds to promote a smooth transition is encouraged by both Part H and Part B of IDEA. In accord with federal law, Kansas has determined that local interagency coordinating councils should work out ways to share financial responsibilities for services, including transportation, provided during this period. Federal funds for ECSE services under Part B may be used to serve 2-year-olds receiving Part B services during the year they become 3, while federal funds under Part H may be used to serve 3-year-olds for the remainder of the school year in which they turn 3. The law clearly states that services must be "free and appropriate" from the day of the third birthday.

A Surge in the Number of Children To Be Served. Because third birthdays occur throughout the school year but children move on to kindergarten only in August, more children will be eligible for ECSE services in most communities in the spring than during the fall. Staffing and transportation must accommodate to serve more children later in the school year because ECSE services must be available for all eligible children. Use of community-based placements minimizes the difficulties of providing appropriate education for children who enter services midyear.

Anticipation of entering children also aids school districts in planning for their arrival. Close working relationships between Infant-Toddler Services and ECSE personnel, systematic Child Find activities, and careful recordkeeping over the years will help LEAs plan for this situation.

Summer Birthdays. The 90-day timeline must be backed into the spring for children with summer or beginning-of-school birthdays, to ensure that a free and appropriate public education is available from each child's third birthday. For children with summer or September birthdays, eligibility for special education services and writing of the IFSP/IEP should occur in the spring, with services scheduled to start on or even a few days before the child's third birthday.

Continuation of services during the summer months may, however, be an issue for many children with summer birthdays. Extended school year (ESY) special education may be an option for some children who can meet the criteria for such services. Developmental data from previous years will be essential in making the case for ESY services. In other cases, the infant-toddler program, if individually appropriate, may be able to carry the family on its roster beyond the third birthday until school begins in the fall. Community programs, such as Mom's Morning Out,

Vacation Bible School and child care, may be a third option. They may continue to provide the 3-year-old with special needs social and language development experiences with typically developing children. Therapies may be available with United Way, private insurance or public human services funds.

"Our son's birthday was six days after school started. The district said he couldn't start until after his birthday. That's silly! Adults should have been more flexible so that a little boy could start school with the other kids."

Anonymous parent

Here again, each local interagency coordinating council (LICC) needs to look at this issue in terms of local options and their limitations; develop a statement of eligibility requirements for various options; and apply different options with the cooperation of several interested families in order to further develop the procedures and services available to help families in transition.

Children Who Don't Qualify for ECSE. Children may fail to qualify for ECSE services, either because of their own positive developmental course during intervention or because of the differing definitions of eligibility between Part H and Part B. Continuing social and language stimulation and support for the family may, nevertheless, be judged essential for the child's ongoing developmental progress.

Children ineligible for ECSE may be served in a community preschool, child care program or Head Start, if the latter serves (or can be modified to serve) 3-year-olds. For community programs, support for tuition may be an issue to be resolved by parent contribution, scholarships from local individuals or groups and/or public funds, such as child care support from the Kansas Department of Social and Rehabilitation Services.

Again, this challenge merits discussion and planning by the LICC. In many cases, the family service coordinator from Infant-Toddler Services and the family will employ the process developed in the community's interagency transition plan and then work with members of the LICC to find and support an appropriate placement to continue the child's learning. Families may, of course, choose to keep their 3-year-olds at home.

Locating Options. Because family situations are unique, unanticipated questions can arise in transition. Perhaps a family wishes to continue in child care outside the school district's boundaries. Perhaps a family has one idea of appropriate services, while the school district has another and Infant-Toddler Services has a third. Perhaps the family wishes the child to spend some time at a parochial preschool but yet receive therapy at a public school, and the school district hasn't considered this option before. Both the family and the school district certainly have some areas where they cannot be flexible—for reasons of law, core values or the well-being of the child or the family.

In many areas, however, flexibility is possible. All parties need to explore those areas of flexibility and, using creative problem solving, generate options and locate solutions that, perhaps, no one had considered previously. By focusing on the child's needs and purposefully supporting a climate of open and honest communication, deliberations among the family and service providers continue until a mutually acceptable solution is determined. In some cases, this process may take more than the usual number of meetings.

One example of a transition area where conflict occasionally develops concerns the amount and type of services to be delivered. It may be proposed that an intervention previously provided by an occupational therapist now be given by a physical therapy paraprofessional or by a teacher instructed by a physical therapist. Or, stimulation of speech that once occurred one-on-one via a teacher on a transdisciplinary team might now be suggested to occur under the leadership of a language pathologist working either with a small group of children or in natural situations in the classroom. Is more—or less—time than in the past appropriate to the child's current needs, and how can this question be evaluated when the nature of the service delivery may also be considered for change?

"Summer services are a really difficult issue. Some children and their families need just that little extra bit of support to keep on progressing, but with young children the need is sometimes difficult to document."

Topeka teacher

Family members and service providers both tend to be more comfortable with the versions of service delivery they have previously known. Now, however, the team, including parents, needs to define the specific outcomes they seek for the child and then determine whether various service options can reasonably hope to achieve those outcomes. For example, if the goal adopted is to increase skills in language use, the child may actually have a better chance to achieve that goal via small group or classroom language therapy than by one-on-one therapy, even though individual therapy has been valuable in the past.

Service providers need to be prepared to share information and efficacy data regarding service delivery models that the family has not previously experienced. And they must express willingness to honestly review the child's progress periodically with the family after transition and make changes if the unfamiliar format for service delivery is not accomplishing its intended outcomes. Here, as with placement decisions, it is not reasonable that all children in a community should receive the same services in the same amounts—because the individual needs of various children differ widely.

Stepping Together

Resources for Families

Families need information about the IDEA and about the transition process to help them participate effectively in decision-making with Infant-Toddler Services and special education. The law requires parent training to accomplish this.

A Plan for Information Sharing. The local transition plan should specify local responsibilities for orienting parents. Further, all personnel in all agencies should be alert to opportunities to answer questions from family members. During the prekindergarten years, many families are building the foundational knowledge about transition planning that they will continue to draw upon throughout their child's school years and beyond.

Family Mentoring. Many families are hesitant to seek certain information from service providers. Instead, families may prefer to talk with other parents regarding some questions. Families Together (800-264-6343 V/TT), an organization of and for parents, offers classes for families about early childhood transitions. These classes, which are offered regionally but can be arranged for any community by request, are taught by family members experienced in early childhood transitions. In addition, a number of communities across Kansas have established local Parent to Parent or family mentoring programs to assist families in transition. Consult Families Together for information about Parent to Parent in your area.

"The easier you can make it for families, the more families are going to be involved...."

Topeka father

"Everybody had done their best to help us understand and participate. The placement choice was a good one that fit our family's values. I felt like I was taking my child from the loving arms of the preschool teacher, and placing her in the welcoming hands of the kindergarten teacher. It all felt very natural."

Salina mother

Parents Sharing with Schools. In order to teach a young child effectively, it is important for schools to know a family's values and goals for their child. Many preschools and Head Starts effectively use questionnaires, such as the one on this page, to encourage parents to share this information. The information is then used by the transition team to make wiser decisions with the family for the child.

Step Ahead at Age 3, a Guide for Families. Another publication in this Bridging Early Services series is intended to help families negotiate the transition at age 3. Called *Step Ahead at Age 3*, the guide systematically takes families through the seven steps of transition and urges them to participate actively in planning for their child's move to new services. A videotape for the same purpose is under development. Copies of *Step Ahead at Age 3* are available by calling the Make a Difference Information Network, 800-332-6262 V/TT.

Helpful Information from Families

(adapted from Project Dakota)

1. **I would describe our child in this way:**
2. **I would describe our family in this way:**
3. **A typical day with our child includes :**
4. **Our child really likes to do (or is good at) these things:**
5. **Our child needs help with (avoids):**
6. **Our family likes to do these things together:**
7. **Recent changes seen in our child at home:**
8. **Questions we have about our child:**
9. **Our child does best when:**
10. **How our child lets us know when she/he wants something:**
11. **Our child is really interested in:**
12. **We would like our child to learn or get better at:**
13. **To help our child, we would like help with:**

One Step at a Time

Preparing Children

Together both sending and receiving programs plan ways to help young children anticipate their new program and enter it with confidence. One strategy is to use books, stories, songs, routines and activity schedules that are similar in both the sending and receiving programs. Another strategy is to introduce people, toys, classrooms and playgrounds to children in advance, either in person or through photographs or videotapes. Having children visit their new program, or even spend several preliminary sessions there, allows them to feel more comfortable during the transition. Finally, including skills that will be useful to the child in the new environment in the IFSP or IEP may help to ease the transition. For more tips, see page 16.

Getting from Here to There

Including Transition in the IFSP/IEP

Transition aims for family and child are required by law to be written into the IFSP and are recommended for inclusion in the IEP. These fall into several categories:

Outcomes for families — "In order to participate effectively in planning their child's transition, Mr. and Mrs. Rodriguez will obtain information about...." "In order to locate appropriate services for her child, Ms. Samuelson will visit Head Start and three preschools where special education services may be delivered using consultation." "In order to assure that their mental health counseling continues after Bryan enters special education services, Bryan's parents and the family service coordinator will meet with the Mental Health Center to discuss funding options."

Outcomes for the transition planning team — "In order to make wise decisions for Janeisha's future education, members of the team will follow this transition process: ..."

Outcomes for children — "In order to prepare to participate in a preschool class, Peter will begin to separate from his mother by attending the church nursery each Sunday and Mom's Morning Out one morning per week." "In order for his daughter to begin to learn to play with other children, Mr. Craddock will invite a neighbor's child to play one morning per week." "Jonah will ask for help when he needs it, using signs or words that are socially acceptable." "In order to become independent in toileting, Casey will indicate toileting needs in time to use the bathroom facilities."

Another Bridge

Head Start Performance Standards on Transition

Each Head Start grantee must have a plan to address the transition of children with disabilities into Head Start from Infant-Toddler Services, as well as from Head Start into the next placement, typically kindergarten. The plan must include strategies to prepare staff and parents for the entry of children with severe disabilities into Head Start.

Each grantee must also plan how to assist parents in the transition of children with disabilities from Infant-Toddler Services to Head Start and from Head Start to kindergarten. The plan must include ways to do the following:

- Support parents of children with disabilities entering from infant-toddler programs.
- Provide information to parents on how to foster the development of their child with disabilities.
- Provide opportunities for parents to observe large-group, small-group and individual activities described in their child's IFSP/IEP.
- Provide follow-up assistance and activities to reinforce program activities at home for children with special needs.
- Refer parents to groups of parents of childen with similar disabilities who can provide helpful peer support.
- Inform parents of their rights under the Individuals with Disabilities Education Act.
- Inform parents of resources, which may be available to them from the Supplemental Security Income (SSI) Program, the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program (Kan-Be-Healthy in Kansas) and other sources, and assist them with initial efforts to access such resources.
- Identify needs (caused by the disability) of siblings and other family members.
- Provide information in order to prevent disability among younger siblings.
- Build parent confidence, skill and knowledge in accessing resources and advocating to meet the special needs of their children.

Federal Requirements

The Law says ...

Federal laws define several elements that must be included in transition planning. As soon as it is determined that an infant or toddler meets the criteria for referral to Infant-Toddler Services, a referral must be made within two working days. Subsequently, comprehensive services, including family service coordination, must be provided within 45 calendar days.

Additionally, transition must be included on the IFSP for every child contemplating a transition, such as a move to another community, a change in program enrollment or a change in service delivery. IDEA requires a number of transition services for every child leaving Infant-Toddler Services at age 3:

❶ The Individualized Family Service Plan (IFSP) for every child must include an individualized transition plan. It must define the steps to be taken to support the movement of the child upon reaching age 3 to Early Childhood Special Education (ECSE) services or to other services. Essential steps include the following:

a) discussion with, and training of, parents regarding future placement and other matters related to the child's transition;

b) procedures to prepare the child for changes in service delivery, including steps to help the child adjust to and function in a new setting; and

c) with parental consent, the transmission of information (including evaluation and assessment information and copies of IFSPs that have been implemented) to the local educational agency to ensure continuity of services.

❷ Free and appropriate public education must begin on the date of the child's third birthday. The location of these services is determined by the IFSP/IEP team. Children eligible for special education services may

a) begin services in the Part B ECSE program at any time during the school year in which the child becomes 3, or

b) remain in the Part H program from their third birthday until the beginning of the following school year.

In either event, services must be provided according to Part B of IDEA, the Kansas Regulations for Special Education, and Kansas laws and regulations.

❸ Infant-Toddler Services, with the consent of the family, must convene a meeting at least 90 calendar days prior to the child's third birthday. The family, Infant-Toddler Services and the LEA meet to review the child's placement options from the third birthday until the beginning of the following school year, as well as to develop an individual plan for the transition period. The timelines in this plan should be developed with participation by all the parties in the transition.

❹ If the child's third birthday occurs during the summer months or just after the new school year begins, then the 90-day notice must be moved back to allow for the LEA to complete the comprehensive evaluation, determine eligibility, develop an IFSP/IEP and determine services to commence at the beginning of the school year, or upon the child's third birthday.

❺ The referral to special education is required by law and must be completed for all children who may step ahead to ECSE services; this is true even if it appears likely that children will remain in their current placement after the third birthday. The 90-day meeting described above constitutes the referral to special education. This referral then begins the 40-school-day timeline for completion of the comprehensive evaluation to determine eligibility for special education. Children who have been eligible for Infant-Toddler Services are not automatically eligible for ECSE services. Eligibility is determined by the results of the comprehensive evaluation.

❻ The family must give written consent prior to the comprehensive evaluation to determine ECSE eligibility. This is true even if the child is likely to continue receiving services from the same agency and/or personnel. It is appropriate for the school district to use current information from the Infant-Toddler program in compiling the evaluation data. The family must give consent in writing prior to the sharing of records, including assessment information. The request for consent may be initiated by either Infant-Toddler Services or the ECSE program, or parents may ask for records to be shared.

❼ Part H and Part B are different federal programs. Parents must give new consent for placement at age 3, even if the child continues to receive the same services from the same personnel. Similarly, due process rights in the new program must be fully explained to families prior to their signing an IFSP or IEP.

Community Transition Planning Guide

Indicators	Occurs? No Somewhat Yes	Target For Change	Priority For Change High Medium Low
1. Leaders and/or staff of sending and receiving programs are acquainted with one another.	N S Y	N Y	1 2 3 4 5
2. Sending and receiving programs have a designated interagency group to work on transition planning.	N S Y	N Y	1 2 3 4 5
3. Sending and receiving programs have an action plan to improve transition in the future.	N S Y	N Y	1 2 3 4 5
4. Each sending and receiving program has designated a Transition Coordinator.	N S Y	N Y	1 2 3 4 5
5. Staff members use written transition procedures to plan activities both to receive new children and families and to send children on to their next services.	N S Y	N Y	1 2 3 4 5
6. Sending and receiving programs develop a timeline of transition activities, which is adapted to meet individual child and family needs.	N S Y	N Y	1 2 3 4 5
7. Sending and receiving programs have developed and periodically revise an interagency agreement on transition.	N S Y	N Y	1 2 3 4 5
8. Families receive assistance in obtaining desired information, support and opportunities for participation in planning their child's transition.	N S Y	N Y	1 2 3 4 5
9. Sending and receiving programs are familiar with each other's services. (e.g.: exchange visits, share curriculum materials)	N S Y	N Y	1 2 3 4 5
10. The family and the sending teacher/services coordinator discuss the transition process, review the steps and determine the family's desired level of involvement.	N S Y	N Y	1 2 3 4 5
11. Transition issues are considered, and appropriate outcomes/goals and objectives are included in the child's service plan.	N S Y	N Y	1 2 3 4 5
12. Sending program notifies receiving program(s) well in advance about the number and birth dates of children who may enter the receiving programs.	N S Y	N Y	1 2 3 4 5
13. Sending program prepares transition progress report, including information on child's experiences and accomplishments.	N S Y	N Y	1 2 3 4 5
14. The sending program obtains written permission from the parents to share information about the child with the receiving program(s).	N S Y	N Y	1 2 3 4 5
15. The family, sending program and receiving program meet at least 90 days prior to the child's third birthday. They discuss the child's progress, consider possible program options and requirements of eligibility for special education services. They review the transition timeline, plan for the family's desired level of participation in the transition process and plan any additional evaluations needed to determine eligibility and appropriate services.	N S Y	N Y	1 2 3 4 5
16. Parents and transition coordinator or sending teacher visit with potential service providers and ask questions.	N S Y	N Y	1 2 3 4 5
17. The family and sending and receiving program staff participate in the IFSP/IEP planning conference. They make decisions regarding services, identify starting date and special services, and begin planning new goals.	N S Y	N Y	1 2 3 4 5
18. Sending program transfers records in a timely manner.	N S Y	N Y	1 2 3 4 5
19. Receiving program visits child in present placement to begin planning for the child's needs, identifies similarities and differences between the two programs and plans strategies to ease the child's transition between them.	N S Y	N Y	1 2 3 4 5
20. Family and sending program implement strategies to ease the child's transition into the receiving program.	N S Y	N Y	1 2 3 4 5
21. Child and family visit the new program.	N S Y	N Y	1 2 3 4 5
22. The family exchanges information with the receiving program about their child (his/her likes and dislikes, effective motivators and approaches to behavior management, current medical information related to the child's special needs, etc.), their goals and dreams for their child's school experiences, and strategies for effective communication between school and home.	N S Y	N Y	1 2 3 4 5
23. Prior to the child's entry, the receiving program obtains necessary resources, including personnel and adaptive equipment. It completes any necessary building modifications.	N S Y	N Y	1 2 3 4 5
24. Receiving personnel implement strategies to ease the child's and family's transition into services.	N S Y	N Y	1 2 3 4 5
25. Family and sending and receiving programs communicate regarding appropriateness and satisfaction with services.	N S Y	N Y	1 2 3 4 5
26. Interagency transition group conducts evaluations of the transition process and considers changes to improve the process.	N S Y	N Y	1 2 3 4 5

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Valuable Transition Activities

- Explanation (written and spoken) to families of the transition process six to nine months prior to their child's third birthday
- Learning about parents' hopes and aims for their child; considering the family's needs and preferences (transportation, community placement, compatibility with child care arrangments and sleep schedules)
- Visits by families to potential placements
- At least one advance visit to the new classroom by the child in the company of the parent
- "Toddler Group," which parents attend with their children over a period of six weeks or longer
- One day a week attendance by the child at the preschool or school, together with the familiar home visitor
- Home visit by the preschool/Head Start/kindergarten teacher together with the familiar home visitor or teacher
- Visit to the playground, guided by either the home visitor or the child's family
- IFSP and IEP objectives designed to help children feel confident and competent in their new surroundings
- "Parent Mentors" — experienced parents to help welcome new families to the school
- Trial bus rides where parents may accompany their young children
- Parent orientation booklet or "Transition Tips," single pages of suggestions to help families in transition
- Planning songs, games, books or class activities to be used in both sending and receiving programs
- Showing children pictures, slides or a "school book" to increase familiarity and anticipation about the new school
- Talk with children about "going to school" or "your new school"
- Buying the child a backpack or a special item of clothing "for school"
- Reading books that help children anticipate the new school
- Encouraging a child to bring a treasured item from the previous program or from home to the new program to provide a sense of continuity

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